

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23266

FILED
Feb 23, 2006
Secretary of State

Entity Name: RIVER COVE CONDOMINIUM 1 ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 1450
CRYSTAL RIVER, FL 34423 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1450
CRYSTAL RIVER, FL 34423 US

New Mailing Address:

FEI Number: 59-2954852 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

REED, EARL I
2927 N RIVERSEDGE BLVD
CRYSTAL RIVER, FL 34429 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: REED, EARL I
Address: 2927 N RIVERSEDGE BLVD
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: SD () Delete
Name: COOPERRIDER, FRAN
Address: 2906 RIVERS EDGE BLVD.
City-St-Zip: CRYSTAL RIVER, FL

Title: D () Delete
Name: GILL, PETER
Address: 2908 N RIVERSEDGE BLVD
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: DT () Delete
Name: MURRAY, ELIZABETH
Address: 2932 N RIVERS EDGE BLVD
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: FOSTER, SONNY
Address: 11961 W. EDGEWOOD COURT
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: DT (X) Change () Addition
Name: GLASS, ANDREA
Address: 2912 N RIVERS EDGE BLVD
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D () Change (X) Addition
Name: DAVENPORT, HEATHER
Address: 11981 W EDGEVIEW COURT
City-St-Zip: CRYSTAL RIVER, FL 34429

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREA GLASS

DT

02/23/2006

Electronic Signature of Signing Officer or Director

Date